



Tennessee Department of Environment and Conservation,
Division of Water Resources
William R. Snodgrass-Tennessee Tower
312 Rosa L. Parks Avenue, 11th Floor, Nashville, TN 37243
(615) 532-0625

**CONCENTRATED ANIMAL FEEDING OPERATION (CAFO)
STATE OPERATING PERMIT (SOP)
NOTICE OF INTENT (NOI)**

Type of permit you are requesting: ☐ SOPCD0000 (designed to discharge) ☐ SOPC00000 (no discharge) ☐ Unknown, please advise
Application type: ☐ New Permit ☒ Permit Reissuance ☐ Permit Modification
If this NOI is submitted for Permit Modification or Reissuance provide the existing permit tracking number: _____

OPERATION IDENTIFICATION

Operation Name: McGlothlin Poultry Farm		County: Macon
Operation Location/ Physical Address: 2555 Wixtown Rd., Westmoreland, TN 37186 31 Carter Ridge Lane, Westmoreland, TN 37186 (36 33'53.50"N 86 8'49.37"W)		Latitude: 36 34'17.30"N Longitude: 86 9'8.48"W
Name and distance to nearest receiving water(s): 2,000 ft Westfork Long Creek 1600 ft U.T. of Clifty Creek		
If any other State or Federal Water/Wastewater Permits have been obtained for this site, list those permit numbers: None		
Animal Type: <input checked="" type="checkbox"/> Poultry <input type="checkbox"/> Swine <input type="checkbox"/> Dairy <input type="checkbox"/> Beef <input type="checkbox"/> Other _____		
Number of Animals: 368,000	Number of Barns: 16	Name of Integrator: Equity Group Kentucky Division
Type of Animal Waste Management: (check all that apply) <input checked="" type="checkbox"/> Dry <input type="checkbox"/> Liquid <input type="checkbox"/> Liquid, Closed System (i.e. covered tank, under barn pit, etc.)		
Attach the NMP <input checked="" type="checkbox"/> NMP Attached	Attach the closure plan <input checked="" type="checkbox"/> Closure Plan Attached	Attach a topographic map <input type="checkbox"/> Map Attached

PERMITTEE IDENTIFICATION

Official Contact (applicant): Russel McGlothlin		Title or Position: Owner		<input type="checkbox"/> Correspondence <input type="checkbox"/> Invoice
Mailing Address: 141 Denning Ford Rd.	City: Portland	State: TN	Zip: 37148	
Phone number(s): 615-323-0551	E-mail: mcglothlinheather@yahoo.com			
Optional Contact: Heather McGlothlin		Title or Position: Co-owner		<input type="checkbox"/> Correspondence <input type="checkbox"/> Invoice
Address: 141 Denning Ford Rd.	City: Portland	State: TN	Zip: 37148	
Phone number(s): 615-830-0453	E-mail: mcglothlinheather@yahoo.com			

APPLICATION CERTIFICATION AND SIGNATURE (must be signed in accordance with the requirements of Rule [0400-40-05-.14](#))

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Name and title, print or type Russel McGlothlin	Signature 	Date 11/25/2014
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STATE USE ONLY

Received Date	Reviewer	EFO	T & E Aquatic Fauna	Tracking No.
Impaired Receiving Stream		High Quality Water		NOC Date

RECEIVED